

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00000015

2 PAGE #
1 of 8

2015 JAN 15 PM 4 00
 RECEIVED
 AUSTIN CITY CLERK

3 COMMITTEE NAME

Inclusive Austin

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

4 COMMITTEE ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

310 Woodbine
Austin, TX 78745☐ Change of Address**5 CAMPAIGN TREASURER NAME**

MS / MRS / MR

FIRST

MI

Houston

NICKNAME

LAST

SUFFIX

McClenny

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER'S STREET ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

310 Woodbine
Austin, TX 78745**7 CAMPAIGN TREASURER'S MAILING ADDRESS**

STREET OR PO BOX; APT/SUITE#; CITY; STATE; ZIP CODE

310 Woodbine
Austin, TX 78745☐ Change of Address**8 CAMPAIGN TREASURER PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 797-2917

9 REPORT TYPE☒

January 15

☐

30th day before election

☐

Dissolution (attach PAC-DR)

☐

July 15

☐

Runoff

☐

10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year

THROUGH

Month Day Year

11/24/2014

12/31/2014

11 ELECTIONELECTION DATE
Month Day Year

11/04/2014

ELECTION TYPE

☐

Primary

☐

Runoff

☒

General

☐

Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME Inclusive Austin		ACCOUNT # 00000015
13 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported Sabino Renteria for City Council, District 3
		B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported
		B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	
	14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$100 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD) <input checked="" type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 6,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,377.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,322.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

15 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Houston Mcclenny
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Houston Mcclenny, this the 15th day of January, 2015, to certify which, witness my hand and seal of office.

Susan C. Harry
Signature of officer administering oath

Susan C. Harry
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/2 Report: 3/6

2 FILER NAME Inclusive Austin

3 ACCOUNT # (Ethics Commission filers)

00000015

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Barger, Dorsey

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

12/07/2014

6 Contributor address; City; State; Zip Code

3300 Govalle
Austin, TX 78702

\$500.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
restaurant owner

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Eden East LLC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

12/09/2014

Contributor address; City; State; Zip Code

755 Springdale Rd.
Austin, TX 78702

\$400.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Foore, Paula

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

12/06/2014

Contributor address; City; State; Zip Code

3413 Shinoak Dr.
Austin, TX 78731

\$200.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
farmer

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Home PAC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

12/09/2014

Contributor address; City; State; Zip Code

8140 Exchange Dr.
Austin, TX 78754

\$3,000.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Kitrell, Edward

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

12/10/2014

Contributor address; City; State; Zip Code

1304 Angelina St.
Austin, TX 78702

\$250.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
restaurant owner

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/6

2 FILER NAME Inclusive Austin**3** ACCOUNT # (Ethics Commission filers)

00000015

4 Date**5** Full name of contributor ☐ out-of-state PAC (ID# _____)
Lorenz, Perry**7** Amount of
contribution (\$)**8** In-kind contribution
description (if applicable)

12/05/2014

6 Contributor address; City; State; Zip Code
1311-A East 6th St.
Austin, TX 78702

\$2,000.00

(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)
real estate**10** Employer (See Instructions)

**CORPORATION OR LABOR ORGANIZATION
CONTRIBUTIONS FOR ADMINISTRATION/SOLICITATION****SCHEDULE C-2**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 5/6**2** COMMITTEE NAME
Inclusive Austin**3** ACCOUNT # (Ethics Commission filers)
00000015**4** Date
12/08/2014**5** Corporate / Labor Organization name
Hillside Pharmacy**6** Amount (\$)
\$200.00

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 6/6	2 FILER NAME Inclusive Austin	3 ACCOUNT # (TEC filers) 00000015
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4 Date 12/16/2014	5 Payee name James, Derek
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City: State: Zip Code 4902 Alta Loma Dr. Austin, TX 78749
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Renteria, Sabino	Office sought: City Council District 3	Office held:
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Date 12/15/2014	Payee name YStrategy
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Amount (\$) \$1,711.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address City: State: Zip Code 3110 Manor Rd. Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing, phone calls and field services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Renteria, Sabino	Office sought: City Council District 3	Office held:
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Date 12/19/2014	Payee name YStrategy
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Amount (\$) \$1,666.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address City: State: Zip Code 3110 Manor Rd. Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> phone calls and field services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Renteria, Sabino	Office sought: City Council District 3	Office held:
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BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Inclusive Austin

For each checking, savings or other financial institution account maintained during 2014__, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Prosperity Bank

Type of account: Checking

The beginning balance: \$0

The ending balance: \$1322.38

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount

SCHEDULE ATX. 4 - attach to form C/OH (C&E)
Reference § 2-2-25, Austin City Code

Amount of interest or dividends earned: _____

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount